





CARE GROUP MODULE 3

Maternal and Newborn Health Flip Charts

This page was left intentionally blank

TABLE OF CONTENTS: MODULE 3

Acknowledgements	2
Part I: Maternal Health	3
Lesson 1: Antenatal Care and Birth Companion	3
Lesson 2: Danger Signs During Pregnancy1	3
Lesson 3: Nutrition and Self-Care in Pregnancy1	9
Lesson 4: Prevention of Mother-to-Child Transmission of HIV	27
Lesson 5: Preparing for Delivery and Birth	35
Lesson 6: Respectful Maternity Care4	15
Lesson 7: Maternal Postpartum Care5	53
Lesson 8: Postpartum Family Planning6	31
Part II: Essential Newborn Care6	39
Lesson 1: Postnatal Care for Baby6	39
Lesson 2: Essential Newborn Care Practices7	77
Lesson 3: Newborn Danger Signs	38
Lesson 4: Care for the Small and Sick Newborn) 4

Lessons, stories, and activities in Module 3: Maternal and Newborn Health complement the information provided in Module 3: Maternal and Newborn Health flipchart. The SCOPE reproductive, maternal, newborn and child health program includes the following partners: U.S. Agency for International Development, World Relief (WR), Christian Connections for International Health.

ACKNOWLEDGEMENTS

Some material in these lessons was adapted from the Food for the Hungry Lesson Plans in Essential Care for Mothers and Newborns, Family Planning, and Essential Nutrition, Hygiene, and Care Actions during Pregnancy as well as the Population Council BETTER Pain Management Approach and Respectful Maternity Care package, and USAID Global Health eLearning Center courses on Antenatal Care, Essential Steps for Improving Newborn Survival, Healthy Timing and Spacing of Pregnancy, Maternal Survival, Postnatal Care, and Postpartum Family Planning. Many thanks to these organizations and authors for developing the materials and illustrations. Many thanks to the original authors for developing the materials. For full citations of lessons adapted for SCOPE, see the accompanying Lesson Plan for Module 3: Maternal and Newborn Health.

PART I: MATERNAL HEALTH

LESSON 1: ANTENATAL CARE AND BIRTH COMPANION



3. Story: Visiting the Health Center (Picture 1.1)

Maria Ngomo sees Amina Nlwere and her sister walking along the path. "Where are you going?" Maria Ngomo asks. "I am going to the health center. The health worker will examine me at many points throughout my pregnancy to make sure I am staying healthy and that the child is growing well. My sister has agreed to be my birth companion so she is supporting me during my antenatal visits."

Maria Ngomo says, "Growing well? I thought that only sick people went to the health center."

4. Ask about Current Practices (Picture 1.1)

? Where is Amina NIwere going? Why?

? Why would she go to the health center if she is not sick?

? Why would she have her sister go with her?

How often did you visit the health center during your last pregnancy?

Let's compare your ideas with the messages on the following pages

Picture 1.1: Visiting the Health Center (Story)





Picture 1.2: Birth Companion





? What do you think these pictures mean?

A "companion of choice" or "birth companion" can support you throughout labor and childbirth.

- A birth companion may be a spouse, mother, sister, friend, or other trusted individual.
- Choose a birth companion who is compassionate, trustworthy, caring, respectful.

Birth companions play an important role. Women and their birth companions should discuss the expectations of this role.

- Birth companions are not expected to do any clinical tasks or make decisions for the mother and child.
- Birth companions join the woman in neighbor group meetings to gain a basic understanding of antenatal care, labor and delivery, and postpartum care.
- Birth companions advocate for services that support the woman's and newborn's health and survival, basic human rights, and comfort.

? Who would make an ideal birth companion in your life?

? Will you be able to come to meeting every two weeks to hear new messages?

Picture 1.3: Importance of Antenatal Care (ANC) during Pregnancy



ANC is essential for maternal and newborn health and survival.



6. Share the Meaning of Each Picture: Importance of ANC in Pregnancy (Picture 1.3)

? What do you think these pictures mean?

ANC is essential for maternal and newborn health and survival.

- All expecting women need care and attention during pregnancy by health care provider. This care is usually called antenatal care.
- ANC visits include health promotion, screening and diagnosis, and disease prevention.
- ANC contact helps pregnant women to be healthier during pregnancy and fewer problem in labor or giving birth.

ANC can save lives.

- ANC can save lives—reducing maternal deaths, newborn deaths and stillbirths.
- **?** Do you think spending your time visiting the health center is a wise use of your time? Why or why not?

Picture 1.4: Components of ANC



The goal of ANC is to help women maintain normal, healthy pregnancies through personal assessment and care.

7. Share the Meaning of Each Picture: Components of ANC (Picture 1.4)

? What do you think these pictures mean?

The goal of ANC is to help women maintain normal, healthy pregnancies through personal assessment and care.

Components of ANC include:

- Early detection and treatment of existing conditions and complications
- Prevention of complications and diseases that can lead to death
- Birth preparedness and complication readiness
- Health and nutrition promotion



Women should receive antenatal care contacts at least eight times during pregnancy.

The content of each ANC contact changes based on the progression of pregnancy and the growth and development of the baby.

8. Share the Meaning of Each Picture: Number and Frequency of Visits (Picture 1.5)

? What do you think these pictures mean?

Women should receive antenatal care contacts at least eight times during pregnancy.

- ANC visits should be conducted by a certified, trained health professional such as a doctor, nurse, or midwife. Visits can occur at a health centre or in the community if the appropriate services and supplies are available.
- Birth companions should accompany her as often as possible.
- Schedule the first contact in the first trimester (initial 12 weeks of pregnancy), two contacts in the second trimester (weeks 13-26), and five contacts in the third trimester (weeks 27-40). More visits may be needed in women with higher risks or exhibiting warning signs.

The content of each ANC contact changes based on the progression of pregnancy and the growth and development of the baby.

- Early visits estimate the due date of the baby and provide critical health behavior messages.
- Later visits include careful monitoring of mother and baby for risks.
- Frequent contact between women and her health provider ensure she is physically and emotionally healthy, build a relationship of trust, and provide space to speak up about preferences and concerns.

LESSON 2: DANGER SIGNS DURING PREGNANCY



3. Story: Waiting Too Long (Picture 2.1)

Annette is in her final month of pregnancy and has not been feeling well all day. "You look pale and feverish," shares her husband. Annette is short of breath when she responds. "I am fine. I think I just worked too hard this morning." That afternoon she feels a sharp pain in her abdomen and she continues to have difficulty breathing. She does not want to go to a health centre but her husband is worried and encourages her to go. He does not want it to be too late, fearing what happened to his sister.

4. Ask about Current Practices (Picture 2.1)

? What signs or symptoms was Annette experiencing that may mean she is in danger?

? Why would Annette not want to go to a health facility?

? What might have happened to the husband's sister, which makes him worry about delaying seeking help?

Let's compare your ideas with the messages on the following pages

Picture 2.1: Waiting Too Long (Story)



Picture 2.2: Complications in Pregnancy



While many pregnancies and births occur without difficulty, every woman is at risk of complication.

5. Share the Meaning of Each Picture: Complications in Pregnancy (Picture 2.2)

? What do you think these pictures mean?

While many pregnancies and births occur without difficulty, every woman is at risk of complication.

- Most maternal deaths happen because of a few causes:
 - o Bleeding before or after childbirth
 - Blood pressure disorders
 - \circ Infections that spread to the blood stream
 - \circ Unsafe abortions
- Most of these complications are preventable and can be identified early enough to provide appropriate treatment when dangers signs are known.

Picture 2.3: Danger signs for Pregnant Woman



Danger signs mean a woman's or baby's life is at risk.

A pregnant woman with one of these danger signs must receive help from a Community Health Worker or health facility provider right away. Do not delay! Waiting could mean death. **?** What do you think these pictures mean?

Danger signs mean a woman's or baby's life is at risk.

The danger signs for a pregnant woman that require immediate attention are:

- Difficulty breathing difficulty
- Severe headache and sudden swelling of face and hands
- Convulsions (shaking) or loss of consciousness (passing out)
- Vaginal bleeding (heavy bleeding)
- Severe abdominal (belly) pain
- Fever (temperature of 38 degrees C or more)
- Foul-smelling discharge/fluid from vagina
- Decreased or lack of fetal movement

Some women are at higher risk of these danger signs, such as women under age 18, and should be monitored with additional care.

A pregnant woman with one of these danger signs must receive help from a Community Health Worker or health facility provider right away. Do not delay! Waiting could mean death.

LESSON 3: NUTRITION AND SELF-CARE IN PREGNANCY



8. Activity: **Micronutrient** Supplementation



9. Discuss **Barriers**



10. Practice & Coaching



11. Request **Commitments**

3. Story: Maria Ngomo Faints (Picture 3.1)

Maria Ngomo is in her final weeks of pregnancy and continues to work tirelessly in the field. In the morning, she sweeps her compound and goes to the market. In the afternoon, she begins preparing food and serves her husband the largest dish and gives him the only portion of meat. She begins feeling weak and light-headed and faints.

4. Ask about Current Practices (Picture 3.1)

- **?** Why did Maria Ngomo faint?
- **?** How long should a woman rest after delivery?
- **?** What is important for a pregnant woman to eat?

Let's compare your ideas with the messages on the following pages

Picture 3.1: Maria Ngomo Faints (Story)



Picture 3.2: A Healthy Plate

Pregnancy places great demands on a woman's body.

In pregnancy, women should eat more and balanced meals.

Three groups of food are important for our bodies—body building, energy, and protecting.







? What do you think these pictures mean?

Pregnancy places great demands on a woman's body, increasing her nutritional needs.

In pregnancy, women should eat more and balanced meals:

- Eat at least one extra serving of staple food per day.
- Eat a balanced diet that contains beans, nuts, animal products, starchy foods, fruits and vegetables.
- Eating a variety of foods with many different colors helps women get the vitamins and minerals they need.

Three groups of food are important for our bodies—body building, energy, and protecting.

- Body building foods make strong bones and muscles.
 - Eat meats and fish.
 - Eat milk foods like milk, and yoghurt.
 - Eat eggs.
 - Eat beans, peanuts, and seeds.
- Energy foods give energy and power for our daily work.
 - o Eat oils like palm oil, animal fat, and butter.
 - Eat roots like manioc, taro, and potatoes.
 - Eat cereals like maize and rice.
 - Eat sugars like honey and sugar cane.
- Protecting foods keep away illness.
 - Eat vegetables like cabbage, green eggplant, and leaves.
 - Eat fruits like plantains, avocado, guava, papaya, and mangoes.

Picture 3.3: Micronutrient Supplements

Some vitamins and minerals (it helps to protect and repair the body) are especially important for mothers and their babies to live and be healthy. Food alone cannot meet these needs. A mix of healthy foods, and a vitamin tablet every day give mothers and babies what they need.



Iron keeps the mother's and infant's blood strong





A multiple micronutrient supplement that includes iron folic acid should be taken by all pregnant women throughout their pregnancy, starting when she first learns she is pregnant.

6. Share the Meaning of Each Picture: Micronutrient Supplements (Picture 3.3)

? What do you think these pictures mean?

Some vitamins and minerals are especially important for mothers and their babies to live and be healthy. Food alone cannot meet these needs. A mix of healthy foods and a vitamin tablet every day give mothers and babies what they need.

A multiple micronutrient supplement that includes iron folic acid should be taken by all pregnant women throughout their pregnancy, starting when she first learns she is pregnant.

Iron keeps the mother's and infant's blood strong

- Women with low iron are weak and have difficulty giving birth and could die
- Women with low iron are at risk of heavy bleeding during or after birth
- Low iron may cause fast breathing and a fast heartbeat
- Eating foods rich in iron (beans, green leaves, liver, yam) and food high in vitamin C (like oranges, tomatoes) can prevent weak blood and problems in pregnancy
- If hookworm or whipworm is common in the community, deworming medication can help prevent iron deficiency
- Pregnant women whose iron level does not improve needs help from a Community Health Worker or at a health facility right away

Folic acid prevents birth defects in a baby's brain

• Folic acid is important in the earliest weeks of pregnancies to prevent brain and spine defects. Couples planning to get pregnant should start taking supplements with folic acid even before becoming pregnant since the baby's brain starts developing right away.

lodine deficiency increases risk of death of babies in pregnancy, childbirth, and soon after birth.

Calcium can reduce the risk of high blood pressure in pregnancy (preeclampsia)

Picture 3.4: Self-Care







? What do you think these pictures mean?

Pregnant women should avoid potentially harmful substances

- Avoid smoking, alcohol, and drugs.
- Stay away from people who are sick.
- Stay away from poisonous chemicals (chemicals that kills insects, weeds) used for farming.
- Discuss any medications with a skilled provider before taking them.

Good hygiene is important for infection prevention

- Wash hands before eating, drinking, and preparing food; after using toilet, helping a child use the toilet, or changing a child's nappies; and after touching soiled objects.
- Use safe drinking water and handle and store food safely.
- Practice good dental hygiene.

Pregnant women should be active, but need extra rest

LESSON 4: PREVENTION OF MOTHER-TO-CHILD TRANSMISSION OF HIV



8. Activity: Case **Scenarios**



9. Discuss **Barriers**



10. Practice & Coaching



11. Request **Commitments**

3. Story: Barumwete has HIV (Picture 4.1)

Barumwete and her husband just received the hard news that they are HIV positive. They are pregnant with their second child and Barumwete is worried about spreading HIV to the infant. Barumwete asks the Community Health Worker what she should do. "This is good news that you and your husband were tested and that you are seeking out the steps for preventing your baby from getting this sickness! You should begin treatment as soon as possible and prepare for the best way to feed your baby when he arrives."

4. Ask about Current Practices (Picture 4.1)

? Why did the Community Health Worker say "this is good news!" to Barumwete?

What might have happened if Barumwete and her husband did not get tested or seek out support for HIV?

Let's compare your ideas with the messages on the following pages

Picture 4.1: Barumwete has HIV (Story)



Picture 4.2: HIV Defined

HIV (human immunodeficiency virus) is a small germ called a virus, that you cannot see. It causes AIDS (acquired immunodeficiency syndrome) and weakens the body's ability to fight off infections.



The virus can spread from one HIV-infected person to another by contact with infected blood, semen, or vaginal fluids.

5. Share the Meaning of Each Picture: HIV Defined (Picture 4.2)

HIV (human immunodeficiency virus) is a small germ called a virus, that you cannot see. It causes AIDS (acquired immunodeficiency syndrome) and weakens the body's ability to fight off infections.

The virus can spread from one HIV-infected person to another by contact with infected blood, semen, or vaginal fluids.

• The disease starts with feeling of flu-like fever, sore throat, and tiredness. Eventually the person may experience weight loss, extreme fatigue, and recurrent infections.

No cure exists for AIDS but closely following anti-retroviral therapy (ART) can significantly slow the disease progress and extend life with the illness.

Picture 4.3: HIV Stigma

HIV stigma refers to negative attitudes and thoughts about people living with HIV.





Talking openly about HIV and treating those with HIV with support and kindness and reduce HIV stigma and discrimination. 6. Share the Meaning of Each Picture: HIV Stigma (Picture 4.3)

?

What do you think these pictures mean?

HIV stigma refers to negative attitudes and thoughts about people living with HIV.

Stigma can lead to discrimination—treating people with HIV differently than those without HIV.

HIV stigma and discrimination is harmful to people living with HIV.

 It affects their mental and emotional health and can make them feel shame, fearful, isolated, or depressed. Stigma against HIV in a community can make people hesitant to get tested and treated for HIV.

Talking openly about HIV and treating those with HIV with support and kindness and reduce HIV stigma and discrimination.

Picture 4.4: Prevention of Mother-to-Child Transmission of HIV (PMTCT)



HIV testing during pregnancy can determine treatment steps for mother and baby.



If a pregnant woman is HIV positive, early treatment can prevent spread of HIV to the unborn baby.



Proper infant feeding can protect her infant.

7. Share the Meaning of Each Picture: Prevention of Mother-to-Child Transmission of HIV (Picture 4.4)

? What do you think these pictures mean?

HIV testing during pregnancy can determine treatment steps for mother and baby.

- Fathers and mothers should go for HIV testing to begin treatment before sickness begins.
- If you or your spouse has HIV, you can protect each other.
- Prevent spread of HIV to your partner by staying faithful (not having other sexual partners) and by using a condom.

If a pregnant woman is HIV positive, early treatment can prevent spread of HIV to the unborn baby.

Proper infant feeding can protect her infant. If a mother is infected with HIV:

- She should breastfeed unless replacement feeding is acceptable, feasible, affordable, safe, and sustainable (AFASS).1
- If the woman chooses to breastfeed: wean as early as is feasible and safe for the infant, but ideally no later than six months postpartum; teach proper latching-on techniques to prevent trauma to nipple; seek immediate attention if infections for mother and infant develop.

¹ Acceptable means the replacement feeding is well tolerated by the infant and agreeable to the family. The replacement feeding option is reasonable for the family to obtain (feasible) over a long period of time (sustainable), is not cost-prohibitive (affordable), and is safe for the infant (e.g., not made with potentially contaminated water).

LESSON 5: PREPARING FOR DELIVERY AND BIRTH



1. Game: Who is the Leader



2. Attendance &

Troubleshooting

?

3-4. Story & Ask

about Current

Practices



5-8. Share the Meaning of Each Picture



3. Story: Breaking Waters (Picture 5.1)

Maria Ngomo decided to have her birth at the health center. She makes a delivery plan and prepares her supplies. She sets aside a small amount of food and water for after delivery, and some clean clothing. She also talks with her neighbors about her plans. She is on her way to the market when a gush of water comes out of her. What is this? Is this a sign of labor?

4. Ask about Current Practices (Picture 5.1)

- **?** What happened to Maria Ngomo? What does it mean?
- **?** Should she go to the health center or wait for another sign?
- **?** What are the signs that you should leave for the health center for delivery?

Let's compare your ideas with the messages on the following pages
Picture 5.1: Breaking Waters (Story)



Picture 5.2: Progression of Labor

Labor and childbirth move through three phases.



The first stage of labor is when pains in the belly (contractions) are frequent, strong, and regular.



In the second stage of labor, pains will continue increase in number, strength, and length until the opening for the baby is full stretched. This stage ends with the birth of the baby.



The third and final stage of labor is the time from the birth of the baby until the feeding bag (placenta) is delivered.

5. Share the Meaning of Each Picture: Progression of Labor (Picture 5.2)

? What do you think these pictures mean?

Labor and childbirth move through three phases.

The first stage of labor is when pains in the belly (contractions) are frequent, strong, and regular.

- Pains will start slowly.
- Pains will increase in number, strength, and length as time passes. These pains begin to open the bag that holds the infant.
- Clear water may come out of the vagina. The infant is inside a bag of liquid in the mother's belly. The bag may break, leaking out the clear liquid. It may break before the pains begins or any time during the pains.
- These are signs that birth is near. Go immediately to a health center or seek a skilled birth attendant.
- Birth companions can begin to support and comfort women and offer pain management options.

In the second stage of labor, pains will continue increase in number, strength, and length until the opening for the baby is full stretched. This stage ends with the birth of the baby.

- When the bag inside the vagina is open, take long, deep breaths.
- The health worker will tell you when it is time to start pushing.
- It may take from sun up to sun down for the bag to open completely.
- Pushing helps the infant's head to come out of the bag.
- Never push on the outside of the woman's body to make the infant come out.
- When the top of the head appears and stays in the opening, take quick, slow breaths. This helps the head come slowly.
- If the mother pushes hard and fast, the vagina may tear.
- The head usually comes out face down.
- The health worker guides the head so the shoulder comes out next. The infant's body will come quickly after the front shoulder.
- Birth companions should encourage adoption of a birth position of the individual woman's choice, including upright positions. Women in the pushing phase should be supported to follow their own urge to push.

The third and final stage of labor is the time from the birth of the baby until the feeding bag (placenta) is delivered.

- Wait to cut the baby's cord 1-3 minutes after birth, when the cord stops beating.
- Place the naked infant onto the mother's naked chest and let him breastfeed. Cover them with a warm blanket. The mother's body heat will warm and calm the infant.
- When the placenta cord lengthens, the mother pushes out the infant's feeding bag (placenta). Never pull on the cord. It may break inside.
- Birth companions continue to support, encourage, and provide comfort to women.

Picture 5.3: Skilled Birth Attendance



It is important to identify a skilled attendant during pregnancy prior to labor and to have a skilled attendant present at every birth.

Skilled birth attendants are trained health professionals such as a midwife, doctor, or nurse.

6. Share the Meaning of Each Picture: Skilled Birth Attendance (Picture 5.3)

? What do you think these pictures mean?

It is important to identify a skilled attendant during pregnancy prior to labor and to have a skilled attendant present at every birth.

Skilled birth attendants are trained health professionals such as a midwife, doctor, or nurse.

• They must have the skills needed to support healthy labor and delivery for mother and baby—including managing some complications and safely referring women for more care if needed.

Picture 5.4: Creating a Birth Plan



Every pregnant woman and her family needs a birth preparedness plan.

All women are at risk of complications and most complications cannot be predicted.

7. Share the Meaning of Each Picture: Creating a Birth Plan (Picture 5.4)

? What do you think these pictures mean?

Every pregnant woman and her family needs a birth preparedness plan.

All women are at risk of complications and most complications cannot be predicted. A plan can reduce delays in problems do occur.

A plan includes:

- Provision for a skilled attendant
- Companion for birth
- Appropriate setting for birth
- Items needed for birth
- Transportation and Financial Planning
- Funds for birth and emergency
- Decision-making in case of emergency
- Emergency blood donors

Picture 5.5: Pain Management Strategy

Bringing a child into the world is rewarding, but also hard work and challenging. Birth companions can encourage mothers and make her comfortable through these steps:



8. Share the Meaning of Each Picture: Pain Management Strategy (Picture 5:5)

? What do you think these pictures mean?

Bringing a child into the world is rewarding, but also hard work and challenging. Encouragement and pain relief helps to promote a fast delivery and healthy mother and baby.

• While skilled birth attendants may be focused on ensuring a safe delivery, birth companions can focus on encouraging mothers and making her comfortable through these steps:

Breathe deeply and rhythmically

- Helps control worry so a mother can save energy and focus on her baby.
- Coach mothers to breathe in and out slowly during early stages of labor and quickly during active labor when pushing is close.

Encourage mother with words

- Use a calm, strong voice to help mothers relax and remind her she is getting closer to seeing her baby.
- Praise and reassuring words help mothers know she is doing well, reduces her anxiety and fear.

Turn, change position, or walk

• Allowing mother to change positions or move as needed and desired can relieve pain.

Think about something positive

• Helping mothers think about her baby, her family, or a fond memory can reduce worry and help distract her from the pain.

Rub the mother's lower back

• Strong, steady pressure on the mother's lower back relieves pain of contractions.

LESSON 6: RESPECTFUL MATERNITY CARE



3. Story: Naomi is Fearful (Picture 6.1)

Naomi is pregnant with her second child. Her mother asks if she will deliver at the health facility where she delivered. "I don't want to go back there," Naomi confided to her mother. "I went alone and was treated harshly. The nurse yelled that I was not progressing quickly enough and then left me to labor by myself for several hours. When she returned, she did not even ask me before she began using forceps during the delivery."

4. Ask about Current Practices (Picture 6.1)

- What kinds of disrespect and abuse was Naomi experiencing at the health facility?
- **?** Have you heard of disrespect or abuse happening during childbirth in your community?

? What rights should women have during childbirth?

Let's compare your ideas with the messages on the following pages

Picture 6.1: Naomi is Fearful (Story)



Picture 6.2: What is Respectful Maternity Care?

<u>All</u> women have the right to respectful maternity care. Sadly, disrespect and abuse are very common in some places. Even if mistreatment is very common, it does not make it right.



Respectful maternity care improves women's experience in labor and delivery and contributes to better outcomes for her and her baby.

5. Share the Meaning of Each Picture: What is Respectful Maternity Care? (Picture 6.2)

? What do you think these pictures mean?

<u>All</u> women have the right to respectful maternity care. Sadly, disrespect and abuse are very common in some places. Even if mistreatment is very common, it does not make it right.

Respectful maternity care means that the services and care given to women include:

- Treating her with dignity
- Offering her privacy
- Ensuring confidentiality
- Freedom from harm and mistreatment
- Giving her informed choice
- Providing her ongoing support during labor and childbirth

Respectful maternity care improves women's experience in labor and delivery and contributes to better outcomes for her and her baby.

Picture 6.3: Types of Mistreatment



Mistreatment in childbirth can consist of:

- Physical abuse
- Sexual abuse
- Verbal abuse
- Stigma and discrimination
- Lack of informed consent and confidentiality
- Neglect and abandonment
- Lack of supportive care
- Loss of autonomy
- Health system constraints
- Lack of privacy
- Lack of information on medical progress or procedures

6. Share the Meaning of Each Picture: Types of Mistreatment (Picture 6.3)

? What do you think these pictures mean?

Mistreatment in childbirth can consist of:

- Physical abuse
- Sexual abuse
- Verbal abuse
- Stigma and discrimination
- Lack of informed consent and confidentiality
- Neglect and abandonment
- Lack of supportive care
- Loss of autonomy
- Health system constraints
- Lack of privacy
- Lack of information on medical progress or procedures

Mistreatment, quality of clinical care, and use of services are closely interlinked—women who experience disrespect often also receive poor quality care and often choose not to return for other services.

Picture 6.4: Role of Birth Companions



Birth companions can be aware of and advocate for the rights of women receiving respectful maternity services.

7. Share the Meaning of Each Picture: Role of Birth Companions (Picture 6.4)

? What do you think these pictures mean?

Birth companions can be aware of and advocate for the rights of women receiving respectful maternity services. Birth companions can stand up for women and encourage birth attendants and health care providers to make sure she has the right to:

- Information about her health.
- Discuss her concerns in an environment in which she feels confident.
- Know in advance the type of procedure that is going to be performed.
- Give informed consent before the provider performs any procedure.
- Decline any treatment or procedure offered.
- Have a birth companion of her choice.
- Respected privacy for procedures.
- Determine how her health information is used and with whom it is shared.
- Be made to feel as comfortable as possible when receiving care.
- Express her views about the services she receives.

LESSON 7: MATERNAL POSTPARTUM CARE



1. Game: The Sun Shines On



2. Attendance &

Troubleshooting

?

3-4. Story & Ask

about Current

Practices



5-7. Share the Meaning of Each Picture



3. Story: Maria Ngomo Needs Help (Picture 7.1)

Maria Ngomo had a healthy, smooth childbirth experience delivering a daughter, 2 weeks ago. She and her husband are overjoyed with having their first child and are navigating the new schedule of sleep and feedings. One morning, Maria Ngomo notices she is having heavy vaginal bleeding. Everything went so well during childbirth. "What could be wrong now," she asked her husband, "and what should we do?"

4. Ask about Current Practices (Picture 7.1)

? Why did Maria Ngomo feel surprised to be bleeding 2 weeks after birth? Is it common to have complications postpartum (in the days and weeks after childbirth)?

? What could the bleeding mean? What should she do next?

Let's compare your ideas with the messages on the following pages

Picture 7.1: Maria Ngomo Needs Help (Story)





The postpartum period is the most vulnerable, high-risk time in the life of mother and child.



High-quality healthcare and a nurturing home environment are critical to preventing the complications that make up the majority maternal deaths.

5. Share the Meaning of Each Picture: Importance of Postpartum Care (Picture 7.2)

? What do you think these pictures mean?

The postpartum period begins immediately after delivery and lasts six weeks.

The postpartum period is the most vulnerable, high-risk time in the life of mother and child. Attending postpartum care visits can prevent these risks. Globally most maternal and infant deaths occur during this time.

High-quality healthcare and a nurturing home environment are critical to preventing the complications that make up the majority maternal deaths:

- Bleeding before or after childbirth
- High blood pressure disorders
- Infections that spread in the blood stream
- Unsafe abortion

Picture 7.3: Timing and Frequency of PPC





pregnancy and childbirth.

6. Share the Meaning of Each Picture: Timing and Frequency of PPC (Picture 7.3)

? What do you think these pictures mean?

Postpartum (after childbirth) care is important for mothers within the first 24 hours of birth—whether after a home birth or a health facility birth.

At least three additional postpartum contacts are essential:

- On day 3 (48-72 hours after birth);
- Between days 7-14 after birth; and
- Six weeks after birth

Visits should be conducted by midwives, nurses, doctors, or other skilled providers or well-trained and supervised community health workers.

After childbirth, mothers need time to rest and health, nutritious food, good hygiene and postpartum care to recover from pregnancy and childbirth.



Deep sadness and feeling physically, mentally and emotionally "low"—postpartum depression—is very common in women after childbirth.



In the year after birth, women's mental wellbeing should be assessed by a trained provider who can make referrals as needed.



Providing mental and social support for mother-baby-family relationships is essential.

Birth companions and families can support by:

- Encouraging touching, holding, talking to, and bonding with baby
- Support the mother in naming and coping with physical, emotional, and social challenges
- Observe women for any signs or risks of domestic abuse

? What do you think these pictures mean?

Deep sadness and feeling physically, mentally and emotionally "low"—postpartum depression—is very common in women after childbirth.

• Many factors contribute, including the natural changes that occur in a woman's body and mind after birth as well as the high demands of this period, frequently without strong social support.

In the year after birth, women's mental wellbeing should be assessed by a trained provider who can make referrals as needed.

Providing mental and social support for mother-baby-family relationships is essential. Birth companions and families can support by:

- Encouraging touching, holding, talking to, and bonding with baby
- Support the mother in naming and coping with physical, emotional, and social challenges
- Observe women for any signs or risks of domestic abuse

LESSON 8: POSTPARTUM FAMILY PLANNING



3. Story: Mubaya is Tired (Picture 8.1)

Mama Mubaya visits a young woman who just delivered her sixth child. When she arrives the woman is crying. "I am so tired. My body hurts and I don't have any strength to care for my children. I cannot continue to have new babies every year. How can extend the time before my next pregnancy? The children come too soon!"

4. Ask about Current Practices (Picture 8.1)

- Why is Mubaya crying? How would spacing her children benefit Mubaya?
- **?** What would be a more ideal timing between children?

? What are family planning methods you are already familiar with?

Let's compare your ideas with the messages on the following pages

Picture 8.1: Mubaya is Tired (Story)



Picture 8.2: Healthy Timing and Spacing of Pregnancy (HTSP) Overview



Women can resume sexual intercourse when they feel comfortable, generally 46 weeks after giving birth.

The return of fertility—the ability to become pregnant again—is not always predictable and couples can become pregnant before a woman's monthly bleeding begins.



Following the recommendations for Healthy Timing and Spacing of Pregnancy (HTSP) helps families delay and space their pregnancies to support a healthy mother, baby, and family.

5. Share the Meaning of Each Picture: Healthy Timing and Spacing of Pregnancy (HTSP) Overview (Picture 8.2)

? What do you think these pictures mean?

Women can resume sexual intercourse when they feel comfortable, generally 4-6 weeks after giving birth.

The return of fertility—the ability to become pregnant again—is not always predictable and couples can become pregnant before a woman's monthly bleeding begins.

Following the recommendations for Healthy Timing and Spacing of Pregnancy (HTSP) helps families delay and space their pregnancies to support a healthy mother, baby, and family.

Picture 8.3: Healthy Timing and Spacing

Healthy timing and spacing means:



Families who practice healthy timing and spacing of pregnancies have improved health and survival of newborns and mothers.

Families that do not time and space their pregnancies are at risk of more harm—mothers and babies are sick and die more often.

6. Share the Meaning of Each Picture: Healthy Timing and Spacing (Picture 8.3)

? What do you think these pictures mean?

Healthy timing and spacing means:

- After a live birth, wait at least 24 months before attempting the next pregnancy.
- After a miscarriage or induced abortion, wait at least 6 months before attempting the next pregnancy.
- Women should try to delay their first pregnancy until at least age 18.

Families who practice healthy timing and spacing of pregnancies have direct benefits including:

- Improved health of the mother
- Improved health of the newborn
- Improved nutritional status
- Reduced unintended pregnancy and abortion

Families that do not time and space their pregnancies are at risk of more harm:

- Mothers and infants suffer from weak blood.
- Mothers are sick more often during pregnancy.
- Children have less to eat and do not grow well.
- Mothers and infants are more likely to die.

Picture 8.4: Postpartum Contraception Options

Many safe contraceptive methods are available for the breastfeeding mother.

Immediately after birth, couples can use:



After six weeks postpartum, mothers can use:



7. Share the Meaning of Each Picture: Postpartum Contraception Options (Picture 8.4)

? What do you think these pictures mean?

Many safe contraceptive methods are available for the breastfeeding mother.

Immediately after birth, couples can use:

- Lactational Amenorrhea Method (LAM)*
- Condom
- Intrauterine Device
- Male vasectomy
- Female tubal ligation

*Note: Lactational Amenorrhea Method (LAM) requires that a woman be fully breastfeeding with no supplementation and amenorrheic and less than six months postpartum.

After six weeks postpartum, mothers can use:

- Hormone injections (e.g., Depo-Provera)
- Hormone implants
- Progestin-only pills

PART II: ESSENTIAL NEWBORN CARE

LESSON 1: POSTNATAL CARE FOR BABY



8. Activity: Preventing Newborn Death



9. Discuss **Barriers**



11. Request Commitments

3. Story: Watching Ancha (Picture 1.1)

Amina Nlwere gave birth to a girl a few days ago. She was named Ancha. The baby guickly latched on to her mother's breast and had several successful feedings, but now she seems uninterested and turns her head away when near her mother's chest. She sleeps most of the day and her face feels cool to Amina's touch. She is alone in her home and wishes she had someone to ask if Ancha is alright.

4. Ask about Current Practices (Picture 1.1)

? What signs in her baby Ancha caused worry for Amina?

? Do these signs mean something is wrong with Ancha?

Let's compare your ideas with the messages on the following pages

Picture 1.1: Watching Ancha (Story)



Picture 1.2: Importance of Postnatal Care

The postnatal period (from delivery through six weeks) is a very important time for care of newborns.



The first month of life is when a newborn is at the highest risk of death.



Early newborn care in a newborn's early life protects them when they are most at risk of life-threatening conditions. It is important to:

- Help baby breathe
- Keep baby warm and dry
- Help baby feed
- Keep baby clean and protected
- Monitor and assess
5. Share the Meaning of Each Picture: Importance of Postnatal Care (Picture 1.2)

? What do you think these pictures mean?

The postnatal period (from delivery through six weeks) is a critically important time for essential care of newborns.

The first month of life is when a newborn is at the highest risk of death.

• Tragically, 3 out of every 4 newborn deaths occur in the first week of life. Most all of these deaths are preventable.

Early newborn care in a newborn's first hour of life protects them when they are most at risk of life-threatening conditions.

- Five components of care for every baby in the first 90 minutes can save lives, whether birth is at home or in a health facility. We will discuss these five parts of early care in the next lesson:
 - Help baby breathe
 - Keep baby warm and dry
 - \circ Help baby feed
 - Keep baby clean and protected
 - Monitor and assess

Picture 1.3: Timing of Postnatal Care

Babies should receive four postnatal care visits:



6. Share the Meaning of Each Picture: Timing of Postnatal Care (Picture 1.3)

? What do you think these pictures mean?

Babies should receive four postnatal care visits:

- within 24 hours
- at 48-72 hours
- between 7 and 14 days
- at 6 weeks

Care in the first day includes:

- full body assessment of the newborn
- preventive care, including eye and cord care, vitamin K, and vaccination
- birth registration with the proper authority

Care in the next visits includes:

- assessment for danger signs and referral as needed
- promotion of hygiene and health behaviors to protect mother and baby

Picture 1.4: Male and Family Involvement

Male partners and other family members play an important role in postnatal care.



One important part of postnatal care that fathers can contribute to is the nurturing care of newborns.



Male partners and families can support nurturing care to newborns in the postnatal period.

7. Share the Meaning of Each Picture: Male and Family Involvement (Picture 1.4)



Male partners and other family members play an important role in postnatal care.

One important part of postnatal care that fathers can contribute to is the nurturing care of newborns.

• Being a responsive caregiver and supporting early bonding, attachment, and learning have life-long impacts on a child's ability to learn, earn, and thrive.

Male partners and families can support nurturing care to newborns in the postnatal period including:

- Immediate support to initiate and establish breastfeeding, with early and uninterrupted skin-to-skin contact for bonding, breastfeeding, and to keep baby warm.
- Responsive newborn care, helping mothers recognize their baby cues for feeding, promote closeness and comfort and respond accordingly to these cues with a variety of options.
- Early learning through smiling, touching, talking, singing, storytelling, communication, stimulation, love and affection.
- Prevention of child maltreatment or abusive parenting.
- Care and protection of the mother's own physical and mental wellbeing, such as encouraging mother to get extra rest and have sufficient, nutrient-rich foods and supporting her personal and household hygiene including handwashing.

LESSON 2: ESSENTIAL NEWBORN CARE PRACTICES



1. Game: Move to the Spot



2. Attendance &

Troubleshooting

?

3-4. Story & Ask

about Current

Practices



5-8. Share the Meaning of Each Picture



3. Story: Halima Gives Birth to Kioni (Picture 2.1)

Halima has just given birth at a health facility to her daughter Kioni. Her midwife takes quick action to dry the baby at birth, wrap the baby well and place her on Halima's chest, and encourage Halima to start breastfeeding right away. She washes her hands before touching Kioni and waits to clamp the umbilical cord for 3 minutes. Halima is so grateful for a birth attendant who is providing the essential newborn care her daughter needs.

4. Ask about Current Practices (Picture 3.1)

- **?** What were some of the newborn care steps the midwife immediately took?
- **?** Why are these steps important for the wellbeing of the newborn?

Let's compare your ideas with the messages on the following pages

Picture 2.1: Halima Gives Birth to Kioni (Story)



Picture 2.2: Help Baby Breathe



At birth, all babies need thorough drying. Drying is often enough to stimulate a healthy baby to breathe.



Crying means a baby is breathing well and other newborn care actions can begin.



A baby who does not cry or is not breathing well need immediate help to breathe the first minute after birth.

 This is sometimes called the "Golden Minute." Steps may include skin-to-skin care with the mother, clearing the airway, and bag and mask resuscitation. 5. Share the Meaning of Each Picture: Help Baby Breathe (Picture 2.2)

? What do you think these pictures mean?

At birth, all babies need thorough drying. Drying is often enough to stimulate a healthy baby to breathe.

Crying means a baby is breathing well and other newborn care actions can begin.

A baby who does not cry or is not breathing well need immediate help to breathe the first minute after birth.

• This is sometimes called the "Golden Minute." Steps may include skin-to-skin care with the mother, clearing the airway, and bag and mask resuscitation.

Picture 2.3: Keep Baby Warm and Dry

Keeping babies warm is a crucial part of essential newborn care and is necessary for newborn survival.



Newborns are at risk of harm from low body temperature and cannot keep themselves warm, especially in the "Golden Hour" after birth.



These actions can keep newborns warm and dry:

- Dry baby immediately after birth
- Keep baby skin-to-skin on the mother's chest
- Cover baby with a blanket and hat
- Delay bathing baby until after 24 hours

6. Share the Meaning of Each Picture: Keep Baby Warm and Dry (Picture 2.3)

? What do you think these pictures mean?

Keeping babies warm is a crucial part of essential newborn care and is necessary for newborn survival.

Newborns are at risk of harm from low body temperature and cannot keep themselves warm, especially in the "Golden Hour" after birth.

These actions can keep newborns warm and dry:

- Dry baby immediately after birth
- Keep baby skin-to-skin on the mother's chest
- Cover baby with a blanket and hat
- Delay bathing baby until after 24 hours

Picture 2.4: Help Baby Feed



Newborns should be placed skin-to-skin with their mother and start breastfeeding right away (within one hour of birth). This step can save many newborns lives.

The golden "first milk" colostrum should be given to baby, not thrown away. It is rich in nutrients and can protect babies against sickness.



Mother should wash their hands before breastfeeding or caring for baby.



Baby should be breastfed for as long and as often as they want.

 During the first days, baby can be fed every hour or several time in one hours, especially during the evening and night time.



Be alert for baby's hunger signs:

 She is awake and seeks breast, her head is back slightly, opens mouth widely, tongue is down and forward, and she may lick or "root" for nipple.



Exclusive breastfeeding (no food or other liquids) is best through six months of age, followed by continued breastfeeding with complementary food through two years. 7. Share the Meaning of Each Picture: Help Baby Feed (Picture 2.4)

? What do you think these pictures mean?

Newborns should be placed skin-to-skin with their mother and start breastfeeding right away (within one hour of birth). This step can save many newborns lives.

The golden "first milk"—colostrum should be given to baby, not thrown away. It is rich in nutrients and can protect babies against sickness.

Mother should wash their hands before breastfeeding or caring for baby.

Baby should be breastfed for as long and as often as they want.

• During the first days, baby can be fed every hour or several time in one hours, especially during the evening and night time.

Be alert for baby's hunger signs:

• She is awake and seeks breast, her head is back slightly, opens mouth widely, tongue is down and forward, and she may lick or "root" for nipple.

Exclusive breastfeeding (no food or other liquids) is best through six months of age, followed by continued breastfeeding with complementary food through two years.

Picture 2.5: Keep Baby Clean and Protected

Practicing good hygiene during and after birth protects newborns against infections that can quickly lead to death.

These steps keep baby clean and protected:



Provide babies with preventive eye care, Vitamin K dose, and routine immunizations per local country guidelines

8. Share the Meaning of Each Picture: Keep Baby Clean and Protected (Picture 2.5)

? What do you think these pictures mean?

Practicing good hygiene during and after birth protects newborns against infections that can quickly lead to death.

These steps keep baby clean and protected:

- Wash hands well before touching the newborn
- Attendant put on sterile gloves before cord care
- Ensure disinfected and sterilized childbirth equipment
- Delay clamping of umbilical cord 1-3 minutes after birth
- Provide babies with preventive eye care, Vitamin K dose, and routine immunizations per local country guidelines

LESSON 3: NEWBORN DANGER SIGNS



3. Story: Mvuyekure has Trouble Breathing (Picture 3.1)

Mvuyekure is six weeks old. Today his mother notices he is having trouble breathing. His chest moves up and down but he doesn't seem to be getting enough air. His mother decides to wait until the afternoon before deciding if he should go to a health center. Maybe he will get better.

4. Ask about Current Practices (Picture 3.1)

- **?** What signs does Mvuyekure show?
- **?** Why does his mother decide to wait to take him to a clinic?
- **?** What could this mean for Mvuyekure?

Let's compare your ideas with the messages on the following pages

Picture 3.1: Mvuyekure has Trouble Breathing (Story)



Picture 3.2: Danger Signs

If you see a child with any of these signs, take the child to the clinic or to a trained health professional immediately.



? What do you think these pictures mean?

Practicing good hygiene during and after birth protects newborns against infections that can quickly lead to death.

These steps keep baby clean and protected:

- Wash hands well before touching the newborn
- Attendant put on sterile gloves before cord care
- Ensure disinfected and sterilized childbirth equipment
- Delay clamping of umbilical cord 1-3 minutes after birth
- Provide babies with preventive eye care, Vitamin K dose, and routine immunizations per local country guidelines

If you see a child with any of these signs, take the child to the clinic or to a trained health professional immediately.

- Difficulty feeding or sucking
- Convulsions (tremors or shaking)
- Fast breathing or gasping
- Severe chest in-drawing (when the child breathes in, the lower chest moves deeply inward)
- No spontaneous movement

Do not delay! If you wait, it may be too late. Many newborns die quickly from these complications.

Go immediately to the health facility if the newborn has any of these danger signs.



? What do you think these pictures mean?

Go immediately to the health facility if the newborn has any of these danger signs.

- Too hot (fever)
- Too cold
- Yellow colored skin or eyes in the first 24 hours of life
- Yellow palms or soles of feet at any age

LESSON 4: CARE FOR THE SMALL AND SICK NEWBORN



3. Story: Ngozi's Baby is Small (Picture 4.1)

Ngozi had a home birth three days ago, delivering a son. During her antenatal care at the clinic, the midwife told her the baby was not full-term and due to arrive for another 6 weeks. Her son came early and is very small. He appears so much more weak than her previous babies. She has heard that babies born too soon or too small or who are born sick require extra care to survive. She asks her husband to call the Community Health Worker for advice.

4. Ask about Current Practices (Picture 4.1)

? Why does Ngozi feel worried about her newborn?

? Why would a small baby need extra care and support?

Let's compare your ideas with the messages on the following pages

Picture 4.1: Ngozi's Baby is Small (Story)



Picture 4.2: Recognizing the Small or Sick Newborn



Babies who are born too soon, too small or with a sickness or health condition need extra attention from a trained health professional in order to survive.

These babies are at risk of long-term disability, poor development, or death. Most babies can survive and develop successfully with the proper care at a health facility that has important equipment and supplies for small and sick babies. 5. Share the Meaning of Each Picture: Recognizing the Small or Sick Newborn (Picture 4.2)

? What do you think these pictures mean?

Babies who are born too soon, too small or with a sickness or health condition need extra attention from a trained health professional in order to survive.

These babies are at risk of long-term disability, poor development, or death. Most babies can survive and develop successfully with the proper care at a health facility.

Most small and sick newborns require care that can only be provided at a health facility because of needed equipment and supplies. The care can often occur at a local, community clinic.

If a low birth weight, premature, or sick newborn is identified at home, the family should be helped in locating a Community Health Worker or closest health post for immediate inpatient care for the baby.

Picture 4.3: Essential Care for Small and Sick Newborns

Small and sick babies need additional postnatal care visits.



The entire family is needed to support the newborn.

6. Share the Meaning of Each Picture: Essential Care for Small and Sick Newborns (Picture 4.3)

? What do you think these pictures mean?

Small and sick babies need additional postnatal care visits to closely monitor their wellbeing and to assess for possible infection or danger signs that require referral to a health facility.

Small and preterm babies need additional warmth.

• Skin-to-skin contact with the mother throughout the day and exclusive breastfeeding can keep babies warm and well fed. Baby stays warm best on the mother's belly. Skin-to-skin contact with the mother can save small babies lives. Baby should not be bathed for at least one day after the delivery.

Extra care should be given to feeding small and sick newborns, including assisted feeding with mother's milk when possible.

• This may include safely feeding the baby with cup or a feeding tube and then transition to breastfeeding. Mothers can be supported to express her own milk if her baby cannot breastfeed.

Babies who are born too soon, too small or with a sickness or health condition may have more difficulties sleeping.

The entire family is needed to support the newborn—mother, father and other caregivers in the home can be involved in newborn care by taking turns with skin-to-skin contact, comforting the baby during restless nights, and bonding with baby.

Picture 4.4: Danger Signs and Additional Needs



If a small or sick newborn has any of the following danger signs. Refer her/him as soon as possible to health post for immediate health care.

- Feeding problems
- Tremors or shaking
- Reduced activity
- Difficult breathing
- Too hot (fever)
- Too cold



Immediately after baby is born, the most common danger signs are low temperature and rapid breathing.

7. Share the Meaning of Each Picture: Danger Signs and Additional Needs (Picture 4.4)

? What do you think these pictures mean?

If a small or sick newborn has any of the following danger signs. refer her/him as soon as possible to health post for immediate health care.

- Feeding problems
- Tremors or shaking
- Reduced activity
- Difficult breathing
- Too hot (fever)
- Too cold

Immediately after baby is born, the most common danger signs are low temperature and rapid breathing.

• Drying the baby immediately after birth and removing wet towel or clothing will prevent heat loss.

Babies born with special needs—such as a chronic respiratory condition, developmental condition, or being a twin—can require additional support and may need referral to more specialized health personnel. Mothers, birth companions, and families can advocate for referral for services as needed.